

Use this form when you are ready to request a withdrawal of your Thrift Savings Plan (TSP) account, but not before you separate from Federal service. **Read the instructions on the back before completing this form.** Type or print the information requested.

I.	1. Name				
INFORMATION ABOUT YOU	Last		First	Middle	
	2.	3.		4.	
	Social Security Numbe	r Date of	Birth (Month/Day/Year)	Daytime Phone (Area Code and Number)	
	5. Address Street address or box number				
			State/Cou	untry Zip Code	
	9. I am separated from Federal service and I expect my separation to exceed 31 full calendar				
		days from the date o	f my separation.	Yes No (STOP. See back of form.)
II.	10. Make my with	drawal as soon as possib	ole or Make my w	vithdrawal in	
YOUR WITHDRAWAL	Month Year I choose to withdraw my TSP account as indicated below (Check either Item 11 or 12 or 13): 11. A life annuity or 12. A single payment or 13. A series of monthly payments				
ELECTION					
	A life annuity The Annuity Re		single payment or 13.	A series of monthly payments (Check and complete a or b or c):	
	Package will be you. (CSRS pa	sent to		a. Payments for months or	
	skip to Section participants skip	IV. FERS		b. per month or	
	Section VI.)	710		c. Payments based on IRS life expectancy table	
				expectancy table	
III. TRANSFER			ment or of each monthly pent (IRA) or other eligible.	payment to be transferred retirement plan. (See back of	
INANGER			thly payments.) Also co		
IV.	15. Are you married (e	ven if separated from you	ur spouse)?		
SPOUSE	Yes (Complete t		No (Skip to Section VI.)		
TRANSFER					
	16. Spouse's Name				
	L	ast	First	Middle	
	17. Spouse's Social Se	ecurity Number			
	18. Spouse's Address				
	10. Opouse's Address	Street address or box nu	mber (If same as yours, write	e "SAME.")	
	19. City		20	21	
			State/0	Country Zip Code	
	22. Check here if y	you do not know where y	our spouse's address. (S	See back of form.)	
V.			ovide for a joint life annuit		
SPOUSE	benefit, level payments, and no cash refund, as required by law. Therefore, this election cannot be processed unless your spouse waives the right to that annuity.				
WAIVER OF ANNUITY		•	•		
BENEFIT	Spouse: I give up my right to the prescribed joint life annuity by signing below.				
Married FERS	23.			24.	
participants only	Spouse's Signature			Date Signed	
	25. Check here if you cannot obtain your spouse's signature. (See back of form.)				
VI.	I certify that the information provided above is true to the best of my knowledge. Warning: Any intentional false				
YOUR	statement in this application or willful misrepresentation concerning it is a violation of the law that is punishable by a fine of as much as \$10,000 or imprisonment for as long as 5 years, or both (18 U.S.C. 1001).				
SIGNATURE AND CERTIFICATION	_	•	3 , , , ,	,	
	26.			27	
	Participant's Signatur	re		Date Signed	

INFORMATION AND INSTRUCTIONS

Make a copy of this form for your records. Mail the original to:

Thrift Savings Plan Service Office National Finance Center P.O. Box 61500 New Orleans, LA 70161-1500

Telephone number: (504) 255-6000

TDD: (504) 255-5113

Read the booklet *Withdrawing Your TSP Account* and the notice "Important Tax Information About Payments From Your Thrift Savings Plan Account" before you make your withdrawal election. Your agency must give you these materials when you separate from service. If it has not done so, ask your agency for them.

Accounts of \$3,500 or less. When your agency reports that you have separated from service, the TSP will notify you about automatic cashout procedures or leaving your money in the TSP. If the TSP receives a properly completed Withdrawal Request before issuing your cashout notice, your election will be processed, and a cashout notice will not be sent to you.

Accounts of more than \$3,500. If you wish to leave your money in the TSP, you do not need to submit any forms. If you wish to withdraw your account, spouse notice or waiver requirements apply (see instructions for Sections IV and V).

SECTION I. 9. Separation from Federal service. If either part of this item is not true, you are not eligible to withdraw your account at this time; do not submit this Withdrawal Request. If you have separated but anticipate being rehired after a break in service of more than 31 full calendar days, see the withdrawal booklet for important information about rehired participants and withdrawal restrictions.

SECTION II. 10. Date of withdrawal. Check the appropriate box to indicate whether you want your withdrawal as soon as it can be processed or at a specific future date. The timing of your withdrawal depends on when we receive this form and when your agency submits your separation information. If you choose a specific date more than four months in the future, the TSP will notify you before that date and will provide current withdrawal and tax information.

Note: You cannot request a withdrawal for a future date that is later than March of the year following the year you become 70 1/2.

- 11: Life annuity. Your account balance must be \$3,500 or more before an annuity can be purchased. The TSP will send you the Annuity Request Package (Form TSP-11-A-B-C) four months before the date you choose in Item 10, or immediately, if you request a withdrawal to be made as soon as possible. Spouse notice or survivor annuity requirements will apply when you complete your annuity election.
- **12:** Single payment. Your entire account balance will be paid out at one time.
- **13:** Series of monthly payments. You can have monthly payments determined in one of three ways. Choose carefully, because you cannot change the way your payments are determined one they begin. For 13a or 13b, your montly payments must be at least \$25.

You may choose one of the following:

 Number of monthly payments. Indicate the number of monthly payments you wish to receive. At the beginning of

- each year, the TSP will recalculate your monthly payment amount based on your account balance at the end of the preceding year and the number of payments remaining.
- **b.** Monthly payment amount. Indicate the dollar amount of your monthly payments. You will receive payments in this amount until your entire account balance has been paid.
- **c.** Payments based on IRS life expectancy table. (Table V, 26 CFR Section 1.72-9). At the beginning of each year, the TSP will recalculate your monthly payment amount based on your account balance and your age.

SECTION III. 14. Transfer to an IRA or other eligible retirement plan. Check Item 14 if you want the TSP to transfer all or part of your single payment or all or part of each monthly payment to an IRA or othe eligible retirement plan. You must also submit Form TSP-70-T, Transfer Information. If you request a transfer at a date more than four months in the future, do not submit Form TSP-70-T at this time. The TSP will mail you a notice several months before your chosen withdrawal date to remind you to submit current transfer information. If Form TSP-70-T is not then received, your election will be cancelled.

Note: The TSP cannot transfer annuity payments, monthly payments based on the IRS life expectancy table, or montly payments expected to last 10 years or more (i.e., 120 or more months). If you are choosing monthly payments in a specific dollar amount (13b above), see the withdrawal booklet to estimate whether your payments will be eligible for transfer.

SECTION IV and V. Spouses' rights apply to accounts that are more than \$3,500 at disbursement. If your account balance is \$3,500 or less, you do not need to complete these sections.

Classification	Requirement	Exceptions
FERS	Spouse is entitled to a survivor annuity unless he or she waives that right.	Whereabouts unknown or exceptional circumstances
CSRS	Spouse is entitled to notification by TSP of participant's election.	Whereabouts unknown

- **22:** Cannot provide spouse's address. If you are a married CSRS participant and you do not know the whereabouts of your spouse, you must submit Form TSP-16, Exception to Spousal Requirements, with the required documentation. (If you are a married FERS paticipant, you must complete Items 15 17, but you do not need to provide your spouse's address.)
- **25:** Cannot obtain spouse's signature. If you are a married FERS participant and you cannot obtain your spouse's signature because his or her whereabouts are unknown or you believe that exceptional circumstances apply, you must submit From TSP-16, Exception to Spousal Requirements, with the required documentation. (If your current spouse has previously waived the right to a survivor annuity, this section does not have to be completed.)

SECTION VI. 26 - 27. Signature and certification. You must sign and date this section; otherwise, this form will not be accepted.

PRIVACY ACT NOTICE. We are authorized to request this information under Title 5, U.S.Code Chapter 84, Federal Employees' Retirement System, Subchapter III, Thrift Savings Plan. Executive Order 9397 authorizes us to ask for your Social Security number, which will be used to identify your account. We will use the information you give us to process the withdrawal of your TSP account. This information may be shared with other Federal agencies in order to administer your account or for statistical, auditing, or archiving purposes. It may also be shared with Federal, state, and local agencies to determine benefits under their programs, to obtain information necessary under this program, or to report income for tax purposes. In addition, we may

share this information with the Parent Locator Service, Department of Health and Human Services, for the purpose of enforcing child support obligations against the TSP paticipant. We may share this information with law enforcement agencies when they are investigating a violation of civil or criminal law. We may give this information to financial institutions, private sector audit firms, annuity vendors, current spouses and, to a limited extent, former spouses and beneficiaries. Finally, this information may also be disclosed to others on your written request. While the law does not require you to give any of the information we are asking for on this form, it may not be possible to process the actions you request by this form if you do not give us this information.